**AUBURN UNIVERSITY**

**DEPARTMENT OF SPECIAL EDUCATION, REHABILITATION, AND COUNSELING**

**SYLLABUS**

Fall Semester 2020

**Course Number: COUN 7500**

**Course Title: Crisis Intervention in Counseling**

**Credit Hours:** 3 Semester hours

**Prerequisites:** None

**Corequisites:** None

**Date Syllabus Prepared:** Initial submission January 2012, Revised August 2012, October 2012, July 2014, August 2015, August 2016; August 2017; August 2018; August 2019; August 2020

**Instructor:** Jessica Meléndez Tyler, Ph.D., LPC-S, NCC

Email: [jim0001@auburn.edu](mailto:jim0001@auburn.edu)

Office: 2056 Haley Center

Office Hours: By appointment

**Texts:**

**Required:**

Jackson-Cherry, L., & Erford, B. (2018). *Crisis assessment, intervention, and prevention* (3rd ed.)*.* Upper Saddle River, NJ: Pearson Education.

**Recommended:**

Kerr, M. M. (2009). *School crisis prevention and intervention.* Long Grove, IL: Waveland Press.

**Optional:**

James, R. K., & Gilliland, B. E. (2017). *Crisis intervention strategies* (8th ed.). Belmont, CA: Brooks/Cole.

**Course Description:**

Development of skills and knowledge for crisis intervention and management in counseling, including prevention planning, intervention strategies and evaluation. This course will prepare you to effectively manage and treat crisis scenarios with your clients and increase your tolerance of emotionally intense content as a practitioner and individual. This course will also highlight and utilize mindfulness strategies that can be beneficial for professionals and clients in times of challenge and self-care.

**Student Learning Outcomes:** Upon completion of this course, students will be able to demonstrate these learning outcomes:

**Foundational Knowledge Goals:**

* Counselors’ roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams (CACREP 2016, II.F.1.c.)
* Ethical standards of professional counseling organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling (CACREP 2016, II.F.1.i.)
* Strategies for personal and professional self-evaluation and implications for practice (CACREP 2016, II.F.1.k.)
* Self-care strategies appropriate to the counselor role (CACREP 2016, II.F.1.l.)
* The role of counseling supervision in the profession (CACREP 2016, II.F.1.m.)
* Multicultural counseling competencies (CACREP 2016, II.F.2.c.)
* Effects of crisis, disasters, and trauma on diverse individuals across the lifespan (CACREP 2016, II.F.2.g.)
* Ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the lifespan (CACREP 2016, II.F.2.i.)
* Suicide prevention models and strategies (CACREP 2016, II.F.5.l.)
* Crisis intervention, trauma-informed, and community-based strategies, such as Psychological First Aid (CACREP 2016, II.F.5.m.)

**Clinical Mental Health Counseling**

* Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders (CACREP 2016, V.C.2.e.)
* Impact of crisis and trauma on individuals with mental health diagnoses (CACREP 2016, V.C.2.f.)
* Techniques and interventions for prevention and treatment of a broad range of mental health issues CACREP 2016, V.C.3.b.)

**Rehabilitation Counseling**

* Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders (CACREP 2016, V.D.2.g.)
* Impact of crisis and trauma on individuals with disabilities (CACREP 2016, V.D.2.h.)

**School Counseling**

* Characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders (CACREP 2016, V.G.2.g.)
* Signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a home where substance use occurs (CACREP 2016, V.G.2.i.)

**Human Dimension Goals:**

* Students will learn about their triggers, biases, and beliefs about challenging issues (i.e., suicide, grief, working with perpetrators, etc.)
* Students will learn more about understanding and interacting with others, and what their thought process is of those interactions in the toughest points of their clients’ lives.

**Caring Goals:**

* Students will adopt increased emotional regulation, empathy, resilience, and tolerance of discomfort.
* Students will increase their interest in helping the most vulnerable.
* Students will increase their ideas of flexibility and adaptability is key.

**Integration Goals:**

* Students will generate connections among ideas of ethical and best practices, versus reacting and flying by the seat of your pants.
* Students will recognize connections between basic and advanced clinical skills.
* Students will identify how self-care and self-awareness are vital for sound clinical practice.

**Assignments/Projects:**

1. ***Weekly reading application and reflection assignments*** (10pts each)
   1. ***Reading questions:*** Students will read assigned material and respond to questions related to this reading each week.Students are expected to provide thoughtful responses that include references to the reading to demonstrate knowledge competency. Students are encouraged to critically think about and apply the reading material to counseling practice. Students’ responses should be uploaded to Canvas before the start of class on the due date.
   2. ***Mindfulness and self-care reflection:*** Students will be asked to practice mindfulness in each class. As part of the weekly assignment, students will reflect on their use of mindfulness in class and between class sessions as well as their overall self-care and wellness.
2. ***Crisis Intervention Demonstration:*** Students will demonstrate a crisis intervention demonstration. Students must demonstrate their ability to conduct a risk assessment, including but not limited to suicide, homicide, psychosis, and/or self-harm. Following the assessment, students must be able to demonstrate their ability to make a clinical judgment based on their conceptualization of the risk and to connect the client to appropriate care. After the demonstration, students will complete the Crisis Intervention Documentation and Plan for Services form for the mock client.
   * Students will complete the demonstration in-class on ***11/4/20*** (50pts)
   * Crisis Intervention Documentation and Plan for Services form is due by class meeting on ***11/11/20*** (25pts)
3. ***Crisis memoir analysis:*** Students will read a book that is a memoir (i.e., true story) of the author’s crisis experience. Students may select a memoir of their choice and receive the instructor’s approval by ***9/9/20.*** After reading the memoir, students will complete an analysis including the components listed below. Papers will be a minimum of 8 pages, not including reference or title page, and will be in APA 6th edition style formatting. A minimum of 5 scholarly sources must be cited within the paper and a reference list must be provided. ***Due 11/11/20*** (75pts). **(Note: please do not choose a fictional novel; this must be a true story)**
   1. Introduce the protagonist
   2. Describe the crisis the protagonist experienced
   3. Provide information from your textbook and from the literature about this type of crisis (e.g., provide diagnostic criteria for a mental disorder the protagonist may have experienced; apply the tasks of mourning to a protagonist who was grieving). This information (i.e., what is typically expected after such a crisis) should be compared and contrasted with the experiences of the protagonist.
   4. Describe any legal and ethical issues involved in the crisis situation (e.g., describe issues related to confidentiality and privacy, mandated reporting, any court proceedings that did or could have occurred related to the crisis, police or law enforcement involvement, etc.)
   5. Describe the environmental, cultural, and developmental influences – How did the person’s environment, culture, and development impact the crisis situation and the person’s response to and ability to cope and heal from the crisis? Consider the person’s resources related to each of these factors.
   6. Describe the services the protagonist received to related to the crisis. **In addition,** describe the following:
      1. How could a clinical mental health/school/rehabilitation counselor be helpful to the protagonist in the midst of his or her crisis? (Write about your specialty area)
      2. What specific types of assessments and interventions might you have used with this person?
      3. Who might you collaborate with when helping this person? What types of referrals might you offer him or her?
   7. Describe your personal experience of reading this person’s crisis experience. Reflect on what it might be like for you to hear this person describe his or her story to you in person. How would you manage your personal response to the client’s experience with remaining in the role of a helper to the client?
4. ***Crisis Intervention Plan Group Project:*** Students will work in assigned groups to develop a comprehensive crisis intervention plan for one specific crisis situation in their future work setting. Groups may choose the crisis scenario, but it must be relevant to the groups’ specialty area. Examples of crisis scenarios include a shooting, act of terrorism, hostage situation, natural disaster (e.g., tornado), suicide, homicide, fire, sexual violence, childhood abuse, and so on. Crisis management plans should apply information covered over the course of the semester in addition to other scholarly and reference material. The plan should be comprised of the following sections and will be presented to the class in approximately 20-30 minutes on ***11/18/20.*** The plan must also be submitted to Canvas by ***11/18/20***:
5. **Crisis Scenario.** The crisis scenario created by the group should include *who is involved, what happened, and where and when the crisis took place*. The scenario should be specific to group members’ specialty area (e.g. school counselors should create a scenario in a school setting; clinical mental health counselors in a clinical mental health counseling setting; rehabilitation counselors in a rehabilitation counseling setting). ***Due for approval by 10/14/20.***
6. **Prevention and Mitigation.** Describe the plan for *prevention or mitigation* related to this specific scenario. For example, describe lockdown drills for a shooting scenario or prevention programming for a scenario involving suicide. Provide citations from the literature to support these strategies.
7. **Crisis Intervention**. Students will develop an action plan that identifies the roles and responsibilities of the professional counselor, specific to clinical mental health, school, or rehabilitation counseling, in response to the crisis to support the agency, school, or clients during the crisis. These should be *supported by literature and cited*. The action plan should include the following components:
   * 1. Describe *what specific crisis interventions would be applied* *and how* (e.g., assessments, counseling interventions, ethical/legal protocols such as mandated reporting, Psychological First Aid, etc.), including a rational *for why these interventions were chosen.* Consideration should be paid to the match between the interventions and the needs of diverse individuals.
     2. Describe *collaborations with other professionals* (e.g., law enforcement, parents, healthcare providers) that would be necessary for this crisis and what *resources*professional counselors might connect students, clients, or families to (e.g., food, shelter, support, medical care).
     3. Write *sample letters*to stakeholders (e.g., parents within the school setting, employers in rehabilitation setting) if applicable. (see Kerr, 2009).
8. **Debriefing.** Describe the content and the process for professional and personal debriefing after implementing the crisis interventions. Provide citations from the literature.

***Class Participation (30 points):*** As this course is vital to prepare you for professional counseling work, it relies heavily upon ongoing interpersonal and professional dynamics, therefore every effort should be made to actively participate in class discussions and activities. In addition, students are expected to actively engage with the discussion and experiential group components of class. Participation will be evaluated in the following way:

*Excellent (A quality):* Proactive participation -- leading, originating, informing, challenging contributions that reflect in-depth study, thought, and analysis of the topic under consideration as well as a demonstrated ability to listen to and build upon the ideas of others.

*Satisfactory (B quality)*: Reactive participation -- supportive, follow-up contributions that are relevant and of value, but rely on the leadership and study of others, or reflect opinion rather than study, thought, and contemplation.

*Minimally Acceptable (C quality)*: Passive participation -- present, awake, alert, attentive, but not actively involved.

*Unsatisfactory (D/F quality)*: Uninvolved or disruptive participation -- electronic engagement unrelated to class; psychologically absent, present but not attentive, sleeping, and/or irrelevant contributions that inhibit the progress of the discussion.

**Grading and Evaluation:**

Course assignments are due **before the start of class** on the dates specified. When an assignment is turned in late, the student’s grade will be reduced by 5% per day, with no assignments accepted more than 1 week past the due date without an approved excuse. Please refer to the Class Policy Statements in the course syllabus for information about excused absences and making up assignments. Students in this course are required to complete the specified course requirements. Students’ final grades are based on these components:

|  |  |  |  |
| --- | --- | --- | --- |
| **Assignment** | **Due** | **Points** | **Standards** |
| Weekly Assignments | Weekly | 110  (11\*10pts) | II.F.1.i.; II.F.1.k.; II.F.1.l.; II.F.1.m.; II.F.2.c.; II.F.2.g.; II.F.5.l.; II.F.5.m; V.C.2.e.; V.C.2.f.; V.C.3.b.; V.D.2.g.; V.D.2.h.; V.G.2.g.; V.G.2.i. |
| Crisis Intervention Demonstration | In-class Demonstration: 11/4/20  Documentation: 11/11/20 | 75 | II.F.2.c.; II.F.2.g.; V.C.2.e; V.D.2.h.. |
| Crisis Memoir Analysis | Book approval: 9/9/20  Analysis due: 11/11/20 | 75 | II.F.1.c.; II.F.2.c; II.F.2.g.; II.F.2.i.; II.F.5.m |
| Crisis Intervention Plan Group Project | Scenario approval: 10/14/20  Group Presentation: 11/18/20 | 50 | II.F.1.c.; II.F.1.i.; II.F.2.g; II.F.2.i.; II.F.5.l; II.F.5.m.; V.C.3.b.; V.D.2.h.; V.G.2.g. |
| Class Participation | Ongoing | 30 |  |
|  | **Total** | **340 pts** |  |

The following scale will be used:

90 – 100% =A

80 – 89.9% =B

70 – 79.9% =C

60 – 69.9% =D

59.9% and Below =F

**Class Policy Statements:**

1. Attendance: Students are expected to attend class and to **be on time** for class meetings. Students are expected to watch each week’s recordings. Students are expected to prepare for class and to participate in class activities and discussions, when applicable. Should students need to be absent for any reason, please contact the course instructor before missing that class meeting. Students are allotted one absence. **This course is a safe place; in the event that content covered in this course is upsetting or support is needed, please take care of yourself and let the instructor know privately immediately.**
2. Excused absences: Students are granted excused absences from class for the following reasons: illness of the student or serious illness of a member of the student’s immediate family, trips for student organizations sponsored by an academic unit, trips for university classes, trips for participation in intercollegiate athletic events, subpoena for a court appearance, and religious holidays. Students who wish to have excused absences from class for any other reason must contact the instructor in advance of the absence to request permission. The instructor will weigh the merits of the request and render a decision. When feasible, the student must notify the instructor prior to the occurrence of any excused absences, but in no case shall notification occur more than one week after the absence. Appropriate documentation for all excused absences is required. Please see Student Policy eHandbook [www.auburn.edu/studentpolicies](http://www.auburn.edu/studentpolicies) for more information on excused absences.
3. Make-Up Policy: Arrangement to make up a missed work due to properly authorized excused absences must be initiated by the student within one week of the end of the period of the excused absence(s). Except in extraordinary circumstance, no make-up assignments will be arranged during the last three days before the final exam period begins.
4. Academic Honesty Policy: All portions of the Auburn University student academic honesty code (Title XII) found in the Student Policy eHandbook [www.auburn.edu/studentpolicies](http://www.auburn.edu/studentpolicies) will apply to university courses. All academic honesty violations or alleged violations of the SGA Code of Laws will be reported to the Office of the Provost, which will then refer the case to the Academic Honesty Committee.
5. Educational Accessibility Accommodations: Students who need instructional modifications are asked to electronically submit their approved accommodations through AU Access and to arrange a meeting during office hours the first week of classes, or as soon as possible if accommodations are needed immediately. If you have a conflict with my office hours, an alternate time can be arranged. To set up this meeting, please contact me by e-mail. If you have not established accommodations through the Office of Accessibility, but need accommodations, make an appointment with the Office of Accessibility, 1228 Haley Center, 844-2096 (V/TT).
6. Course contingency: If normal class and/or lab activities are disrupted due to illness, emergency,

or crisis situation, the syllabus and other course plans and assignments may be modified to allow completion of the course. If this occurs, an addendum to your syllabus and/or course assignments will replace the original materials.

1. Professionalism: As faculty, staff, and students interact in professional settings, they are expected to demonstrate professional behaviors as defined in the College’s conceptual framework. These professional commitments or dispositions are listed below:
   1. Engage in responsible and ethical professional practices
   2. Contribute to collaborative learning communities
   3. Demonstrate a commitment to diversity
   4. Model and nurture intellectual vitality
2. Use of Electronics: Electronics must be put on silent and not distracting during class times, unless the instructor is notified of special circumstances (e.g., on-call professional services, family emergencies). **This is a highly emotionally charged class that needs to feel safe; computers and electronic notepads may be used for class purposes only and must not be a distraction.**

**Course Schedule:** The course sequence aims to address clinical topics that are most relevant and in the order you will likely face them in your practicum sites this semester. Each subject serves to create a foundation from which you can build and enhance your understanding of the nuances and more specifics of crisis counseling and the populations you will serve in this capacity.

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| --- | --- | --- | --- | --- | --- |
| **Week** | **Date** | **Content** | **Readings** | **Assignments Due** | **2016 CACREP Standards** |
| 1 | 8/19/20 | Introduction to Crisis Intervention  Professional counselors’ roles in crisis intervention | Ch. 1  Carrick (2014)  Jacobs (2014) |  | II.F.1.c. |
| 2 | 8/26/20 | Legal, ethical, and multicultural considerations  Counselor safety and self-care in crisis counseling | Ch. 2, 3, & 14  Alabama’s Mandatory Child Abuse and Neglect Reporting Law (2012) and 2013 Changes document  Goldbach et. al (2019) | Weekly Assignment | II.F.1.i.  II.F.1.k.  II.F.1.l.  II.F.1.m.  II.F.2.c.  II.F.2.g.  V.D.2.h. |
| 3 | 9/2/20 | Suicide and Homicide: Prevention, Risk Assessment, and Intervention | Ch. 6  Lewis (2007)  SAMHSA (2012, 2015)\* | Weekly Assignment | II.F.2.g.  II.F.2.i.  II.F.5.l.  II.F.5.m.  V.C.3.b.  V.G.2.g. |
| 4 | 9/9/20 | Non-suicidal Self-Injury and Psychosis: Assessment and Intervention  *Guest speaker: Alsana Eating Recovery Community* | Buser & Buser (2013)  Sachs (2011)  Hyldahl & Richardson (2011)\*  Taylor & Gibson (2016) | Weekly Assignment- ***Include memoir title for approval*** | II.F.2.g.  II.F.2.i.  V.C.3.b.  V.G.2.g. |
| 5 | 9/16/20 | Essential Crisis Intervention Skills  Mental Status Exams  Trauma-Informed Care | Ch. 4  Sommers-Flanagan & Sommers-Flanagan (2009)  SC: Cavannah (2016)  SAMHSA (2014)\* | Weekly Assignment | II.F.2.i.  II.F.5.m.  V.C.2.f.  V.C.3.b.  V.G.2.g.  V.G.2.g. |
| 6 | 9/23/20 | Loss, Grief, & Bereavement | Ch. 5  Ener & Ray (2018)  Shannon & Wilkinson (2020) | Weekly Assignment |  |
| 7 | 9/30/20 | Intimate Partner Violence & Sexual Violence  *Guest speaker: Melissa McConaha, AU Safe Harbor* | Ch. 8 & 9  Crane & Easton (2017)  Jarnecke & Flanagan (2020)  Hammett, Karney, & Bradbury (2020) | Weekly Assignment | II.F.2.g.  II.F.2.i.  II.F.1.c.  V.C.3.b. |
| 8 | 10/7/20 | Crisis, Diagnosis, and Evidence-Based Treatments  Psychological First Aid | National Center for PTSD (2013)  CMHC & RC: Brymer et al. (2006)  SC: Brymer et al. (2012) | Weekly Assignment | II.F.5.m.  V.C.2.f. |
| 9 | 10/14/20 | Military Issues and First Responders  *Biographical film: Thank You for Your Service* | Ch. 11  Carrola, & Corbin-Burdick (2015)  Kelly et al. (2014)  Garner, Baker, & Hagelgans (2016) | Weekly Assignment  **Submit Group Project Scenario for Approval** | II.F.2.g.  II.F.2.i.  V.C.3.b. |
| 10 | 10/21/20 | Child Abuse  *Guest speaker: Jacqueline Burgess, Tri-County Child Advocacy Center* | Ch. 10  Haiyasoso & Moyer (2014)  Foster, J. M., & Hagedorn, W. B. (2014)  Hodges & Myers (2010)  Winder (1996) | Weekly Assignment | II.F.2.g.  II.F.2.i.  II.F.1.c.  V.C.3.b.  V.G.2.g. |
| 11 | 10/28/20 | Crisis and Substance Use Disorders  *Guest speakers: Chief Jay Turner and the Alex City Drug Task Force* | Ch. 7  Mills (2015) | Weekly Assignment | II.F.1.c.  II.F.1.i.  II.F.2.g.  V.C.2.e.  V.C.3.b.  V.D.2.g.  V.G.2.i. |
| 12 | 11/4/2020 | **Risk Assessment and Intervention: Skill Demonstrations** | | **Crisis Intervention Demonstrations** | II.F.2.g.  II.F.2.i.  II.F.5.l.  V.C.3.b.  V.D.2.h. |
| 13 | 11/11/20 | Emergency Preparedness & Responses  Crisis Counseling Refugees | Ch. 12 &13  American Red Cross (n.d.)  SAMHSA (2013)\*  Bemak & Chung (2017) | Weekly Assignment  **Crisis Memoir Due** | II.F.2.g.  II.F.2.i.  II.F.1.c.  II.F.5.m.  V.C.3.b.  V.D.2.h.  V.G.2.g. |
| 14 | 11/18/20 | Class Wrap Up | | **Crisis Intervention Plan: Group Presentations due** | II.F.1.c.; II.F.1.i.; II.F.2.g; II.F.2.i.; II.F.5.l; |
| 15 | 11/25/20 | THANKSGIVING BREAK | | | |

\*Notes optional reading

**COVID Related Policies**

### **Statement on COVID-19 physical distancing**

Face coverings are not a substitute for physical distancing. Students shall observe physical distancing guidelines where possible in the classroom and in public spaces.

Students should avoid congregating around doorways before or after class sessions. If the instructional space has designated entrance and exit doors students are required to use them. Students should exit the instructional space immediately after the end of instruction to help ensure social distancing and allow for the persons attending the next scheduled class session to enter.

### **Face covering policy**

In response to COVID-19, and in alignment with Auburn University's Presidential directives, and local, state, and national health official guidelines face coverings are required at all times while on campus, except when alone in a private office. This includes the classroom or any type of in-person instructional activity, and public spaces. "A “face covering” is defined as a “covering that fully covers a person’s nose and mouth, including without limitation, cloth face mask, surgical mask, towels, scarves, and bandanas.

If a student has a medical exception to the face covering requirement, please contact the Office of Accessibility to obtain appropriate documentation.

### **Possibility of going remote**

In the event that the University is forced to move to fully online instruction, please be assured that the learning goals and outcomes of the course will not change; however, some aspects of the course will change in terms of the mode of delivery, participation, and testing methods. Those details will be shared via a Canvas Announcement within 24 hours of the announcement that we are going remote. Please be prepared for this contingency by ensure that you have access to a computer and Internet.

### **Assignments / schedule subject to change due to pandemic**

The course schedule and assignments are designed with the most up-to-date information and policies in mind. If the situation changes, I will make every effort to keep the schedule as consistent as possible; however, please note that the due dates for assignments and tests may be changed during the semester in response to the changing health and safety requirements or policies of the University. When changes are made, they will be communicated via Canvas Announcement, Canvas message, and all assignment due dates will be updated.

### **In the event a student in class tests positive**

Students must conduct daily health checks in accordance with [CDC guidelines (Links to an external site.)](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html). Students testing positive for COVID-19, exhibiting COVID-19 symptoms or who have been in direct contact with someone testing positive for COVID-19 will not be allowed to attend in-person instructional activities and must leave the venue immediately. Students should contact the [Student Health Center (Links to an external site.)](https://cws.auburn.edu/aumc/) or their health care provider to receive care and who can provide the latest direction on quarantine and self-isolation. Contact me immediately to make instructional and learning arrangements.

### **In the event that I test positive or am required to quarantine**

If I am unable to attend our F2F portions of the class, we will transition to a fully online course until I am allowed to return. If I become ill or unable to lead the class, a backup instructor will be identified, and they will communicate any changes or updates to the course schedule or mode of instruction as soon as possible.

### **Zoom policies**

When we meet on Zoom, your attendance, attention, and participation are expected. Zoom participation requires you to keep your video on and your microphone muted when you are not speaking. Although you may be participating from your domicile, our Zoom meetings are professional interactions. You should dress and behave as you would in a normal F2F classroom. To the extent possible, please minimize distractions in the background. If you have any issues with sharing your video feed, adhering to this policy, or anything else related to your use of Zoom please notify me via email in the first week of class. I’m happy to consider and provide accommodations, but you will need to be in communication with me.

### **Attendance**

Your health and safety, and the health and safety of your peers, are my top priorities. If you are experiencing any symptoms of COVID-19, or if you discover that you have been in close contact with others who have symptoms or who have tested positive, you should not attend in-person classes. You will not be penalized for such an absence nor will you be asked to provide formal documentation from a healthcare provider. My hope is that if you are feeling ill or if you have been exposed to someone with the virus, you will stay home to protect others. I don’t want the need for documentation to discourage you from self-isolating when you are experiencing symptoms.

Please do the following in the event of an illness or COVID-related absence:

* Notify me in advance of your absence if possible
* Keep up with coursework as much as possible
* Participate in class activities and submit assignments electronically as much as possible
* Notify me if you require a modification to the deadline of an assignment or exam

Finally, if remaining in a class and fulfilling the necessary requirements becomes impossible due to illness or other COVID-related issues, please let me know as soon as possible so we can discuss your options.

**Justification for Graduate Credit:**

This course includes advanced content crisis intervention. This includes content as specified by the Council for the Accreditation of Counseling and Related Programs (CACREP, 2009). All academic content approved by CACREP is for advanced Masters and/or Doctoral graduate study. This includes rigorous evaluation standards of students completing the student learning outcomes specified in this syllabus.

**SYLLABUS DISCLAIMER:**

The instructor reserves the right to make changes to the syllabus as needed due to the developmental needs of the students.  In the event that changes are deemed necessary, the instructor will inform students at the earliest date possible in class or via email.

**Articles and Resources**

American Red Cross. (n.d.) *Preparing for disaster with people with disabilities and other special needs.* Author.

American Society of Suicidology. (n.d.). Core competencies for the assessment and management of individuals at risk for suicide. Retrieved from http://www.suicidology.org/training-accreditation/rrsr

Bemak, F., & Chung, R. C. (2017). Refugee trauma: Culturally responsive counseling interventions. *Journal of Counseling & Development, 95*, 299-308. doi:10.1002/jcad.12144

Brymer, M., Jacobs, A., Layne, C., Pynoos, R., Ruzek, J., Steinberg, A., Vernberg, E., & Watson, P. (2006). *Psychological First Aid: Field Operations Guide (2nd ed.*). National Child Traumatic Stress Network and National Center for PTSD. Retrieved from www.nctsn.org or www.ncptsd.va.gov.

Brymer M., Taylor M., Escudero P., Jacobs A., Kronenberg M., Macy R., Mock L., Payne L., Pynoos R., & Vogel J. (2012). *Psychological first aid for schools: Field operations guide (2nd ed.)*. Los Angeles: National Child Traumatic Stress Network

Buser, T. J., & Buser, J. K. (2013). The HIRE model: A tool for the informal assessment of nonsuicidal self-injury. *Journal of Mental Health Counseling, 35*, 262-281.

Carrick, L. (2014). Person-centred counsellors’ experiences of working with clients in crisis: A qualitative interview study. *Counselling & Psychotherapy Research, 14*(4), 272–280. https://doi-org.spot.lib.auburn.edu/10.1080/14733145.2013.819931

Carrola, P., & Corbin-Burdick, M. F. (2015). Counseling Military Veterans: Advocating for Culturally Competent and Holistic Interventions. *Journal of Mental Health Counseling, 37*(1), 1–14. https://doi-org.spot.lib.auburn.edu/10.17744/mehc.37.1.v74514163rv73274

Cavanaugh, B. (2016). Trauma-informed classrooms and schools. *Beyond Behavior, 25*(2), 41-46.

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